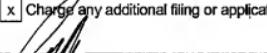


AMENDMENT TRANSMITTAL LETTER					Docket No. 0020-5615PUS1
Application No. 10/519,941-Conf. #5052	Filing Date December 29, 2004		Examiner J. Z. Chen	Art Unit 4111	
Applicant(s): Masaya TANAKA					
Invention: CARBON DIOXIDE EXTERNAL ADMINISTRATION DEVICE					
MS Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450					
Transmitted herewith is an amendment in the above-identified application.					
The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
Total Claims	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
8	- 20	=	0	x 50.00	0.00
Independent Claims	1	- 3	= 0	x 210.00	0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
Other fee (please specify): Extension for response within first month 120.00					
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT: 120.00					
<input checked="" type="checkbox"/> Large Entity <input type="checkbox"/> Small Entity <input type="checkbox"/> No additional fee is required for this amendment. <input checked="" type="checkbox"/> Please charge Deposit Account No. 02-2448 in the amount of \$ 120.00 A duplicate copy of this sheet is enclosed. <input type="checkbox"/> A check in the amount of \$ _____ is enclosed. <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. <input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. 02-2448 as described below. A duplicate copy of this sheet is enclosed. <input checked="" type="checkbox"/> Credit any overpayment. <input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.					
Dated: February 29, 2008					
 Andrew D. Weikle Attorney Reg. No.: 32,868					
BIRCH, STEWART, KOLASCH & BIRCH, LLP 8110 Gatehouse Road Suite 100 East P.O. Box 747 Falls Church, Virginia 22040-0747 (703) 205-8000					

Under the Paperwork Reduction Act of 1995, no person is required to respond to a collection of information unless it displays a valid OMB control number.

Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).		Complete if Known	
Fee Transmittal For FY 2008		Application Number	10/519,941-Conf. #5052
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Filing Date	December 29, 2004
TOTAL AMOUNT OF PAYMENT (\$ 120.00)		First Named Inventor	Masaya TANAKA
		Examiner Name	J. Z. Chen
		Art Unit	4111
		Attorney Docket No.	0020-5815PUS1

METHOD OF PAYMENT (check all that apply)

<input type="checkbox"/> Check	<input type="checkbox"/> Credit Card	<input type="checkbox"/> Money Order	<input type="checkbox"/> None	<input type="checkbox"/> Other (please identify): _____
<input checked="" type="checkbox"/> Deposit Account		Deposit Account Number:	02-2448	Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

<input type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17	<input checked="" type="checkbox"/> Credit any overpayments

FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Small Entity Fee (\$)	Fee Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)		
Utility	310	155	510	255	210	105		
Design	210	105	100	50	130	65		
Plant	210	105	310	155	160	80		
Reissue	310	155	510	255	620	310		
Provisional	210	105	0	0	0	0		

2. EXCESS CLAIM FEESFee Description

Each claim over 20 (including Reissues)

Small Entity Fee (\$)	Fee (\$)
	50
	25
	210
	105
	370
	185

Each independent claim over 3 (including Reissues)

Multiple dependent claims

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
8	- 20 = 0	× 50.00	= 0.00
HP = highest number of total claims paid for, if greater than 20.			

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
1	- 3 = 0	× 210.00	= 0.00
HP = highest number of independent claims paid for, if greater than 3.			

Multiple Dependent Claims

Fee (\$)	Fee Paid (\$)

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(c)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(g).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
	- 100 = 0	/50 = 0	(round up to a whole number) × 260 = 0	

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): 1251 Extension for response within first month

120.00

SUBMITTED BY		Registration No. (Attorney/Agent)	32,868	Telephone	(703) 205-8000
Signature				Date	February 29, 2008
Name (Print/Type)	Andrew D. Meikle				